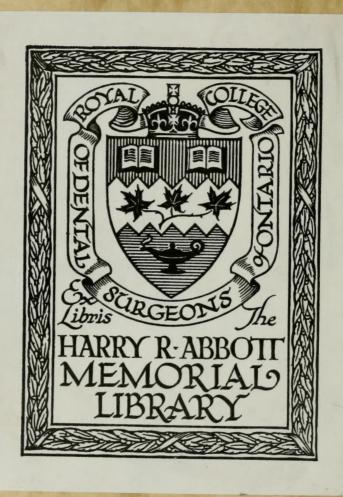
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## State Dentistry

Richard G. McLaughlin, D.D.S., Toronto

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CIENCE is a beautiful thing, undoubtedly, and of itself well worth all the labour that man may bestow upon it; but it becomes a thousand times grander and more beautiful when it becomes a power; when it becomes the parent of virtue. This, then, is what we have to do; to discover the truth; to realize it out of ourselves in external facts, for the benefit of society; in ourselves, to convert it into a faith capable of inspiring us with disinterestedness and moral energy."—GUIZOT.

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## State Dentistry\*

RICHARD G. McLaughlin, D.D.S., Toronto.

Mr. Chairman and Members of the Toronto School Dental Staff:

APPRECIATE the honor you have done me in this invitation to speak to you on the very important subject of State Dentistry. I assure you, I also appreciate the responsibility of making any definite statements on a subject that is, as yet, in the formative period and which promises so much if wisely guided, as does State Dentistry. As this great undertaking is still in its infancy, we have as yet few precedents of value to guide us in our deliberations. I might even say without appearing at all egotistic, that we in Toronto are to-day in the vanguard in this work of school dentistry. So, in considering the future of this movement, we ought to have not only our present plans definitely before us but also our ideal and our ambitions for the future.

#### PURPOSE OF CONFERENCE.

I believe that this is the first conference of this nature that the School Dentists of Toronto have held, and no doubt it has been convened for a definite purpose, and one of the main results sought after would be that of inspiration. That by coming together in this way you might get a view of this great work through the eyes of others, and thus gain a vision of the far-reaching effects of the service you are rendering. To really produce your best results to-day, you must look beyond the mere daily toil amongst the children of the classroom or the school clinic and see in the future years, these very boys and girls taking the leading places in life, largely because they have maintained their physical fitness as a result of your work and your instructions in the matter of proper mouth conditions.

#### STATE CONTROL.

State control, in this country, has developed somewhat slowly, but war conditions have given it a new lease of life, if not a new birth. By degrees the great public utilities are being brought under government control, until now the authorities, to a certain extent, are taking under their guidance the distribution of the nation's food supply. Why state control? Is not such a step on the part of the government an infringement of the constitutional rights of a free people? The answer to all such objections is the public welfare. All legislation has that end in view.

Such an answer gives the strongest kind of reason for the introduc-

<sup>\*</sup> Address delivered at the Easter Conference of the Toronto School Dental Staff, April 2nd and 3rd, 1918.

tion of state dentistry. What is state dentistry? Briefly it infers that the state shall take upon itself the responsibility of insuring that each citizen, from childhood to old age, is possessed of a clean and healthy mouth. That is the ideal to be aimed at in oral conditions.

#### How FAR SHOULD THE STATE GO?

Just how far the state should go in the aforesaid responsibility is an important question. The extremist advocates state control of the entire medical and dental professions. That the members of these professions should become employees of the Government, and one should be stationed in a certain community and become responsible to the Government for the health of the members of that community. Such a proposition has been mooted in the Government circles in Great Britain within the last year. Here in Ontario we do not favor such a radical step, which we feel would not be in the best interests of either the public or the healing professions.

#### NEW ZEALAND.

New Zealand has before its Government to-day, a proposition for state dentistry which, for originality and completeness, has much to commend it. The Government of that country was asked to inaugurate a dental department over which would be appointed a Director, responsible immediately to the Cabinet. This Director would have at his service a sufficient number of dental inspectors and practising dentists, to look after the dental needs of all the school children in the country, save those who would be taken care of by the private practitioner.

To insure a sufficient number of school dentists that the extra service would demand, it was recommended that students would receive free education at the dental college together with a living allowance, while at college, and in return for which they would serve the state, under bond, for five years as school dentists, at a stated salary, after which they would have the option of continuing in the state service or of entering private practice.

This proposition appealed very strongly to the New Zealand Government, including the Officer of Health, but the stumbling block to its adoption was the enormous initial cost of the undertaking. An estimated cost of at least £100,000 to put the scheme into operation was more than could be set aside for a new undertaking in war time. However, the magnitude of the New Zealand proposition indicates how seriously civilized countries are taking up the matter of bettering the mouth conditions of their citizens.

#### WHAT ARE WE AIMING AT IN ONTARIO?

Our immediate aim for Ontario, in short, is this: To have the Government bring in the necessary legislation to insure that every boy and girl in our schools shall have their teeth examined at stated intervals,

and a proper report sent to the parents or guardians, and that all school children shall receive proper instruction as to the importance and care of the teeth.

In order that this may be accomplished satisfactorily in the rural sections the Oral Hygiene Committee is urging upon the Provincial Government a plan which might be outlined as follows:

First: That a Dental Department be established in connection

with the Provincial Board of Health.

Second: That a Director of Dental Services be appointed as head

of the department.

Third: That this appointment be followed by the appointment of three or four dental inspectors as the work progresses and their services are found necessary.

Fourth: That necessary legislation be introduced to enable any township or county as a unit to introduce dental inspection into the

schools within the bounds of such a community.

Fifth: That any such township, having decided on dental inspection, should have the services of one of the dental inspectors, who shall carry out an examination of the children's teeth in such schools; give proper instruction as to the importance and care of the teeth and, whenever possible, deliver an illustrated lecture in the schoolroom the same evening to which the parents and friends will be invited.

Such would be the beginning of this work, which would eventually spread to all parts of the province, and not only would this be made to cover the children in our schools, but eventually, as the work progressed and its value properly estimated, it would spread into the adult region until every man and woman, whatever their occupation, be compelled to present a clean and healthy mouth with a proper masticating apparatus.

#### WHEN?

When are we going to have the necessary legislation to introduce dental inspection throughout the provinces? Just as soon as the Government, the Health Departments, and the people get to understand that we cannot be assured of healthy boys and girls, men and women (capable of the maximum efficiency in study, or work, or service of any kind) until we have better teeth and clean mouths.

The industrial world is understanding to-day, as never before, that "physical fitness is a pre-requisite to efficiency," and is just beginning to understand an equally important fact that a clean and healthy mouth is a pre-requisite to physical fitness. The time was when a great industrial organization looked upon its employees as so many hands in the workshop. They came and they went and were paid their wages and right there the interest ended. But these industrial kings are seeing their mistake. In the largest and best concerns, every man taken into the employ of the company is looked

upon as an investment and the more efficient that workman, the better dividends he will pay the company. Therefore, every precaution is taken to keep him fit in every particular so as to render his highest service. Industriral medicine and surgery is playing a large part in industrial efficiency to-day. The employees are regularly examined as to health conditions by the company's physician. The unfit are either weeded out or put under the necessary treatment and instruction to bring about a return to normal conditions.

Now the state should look at its subjects just in that way. Every citizen is an investment on the part of the state and should be so watched and cared for physically, mentally and morally, as to make him an efficient producer in whatever sphere of action he may be en-

gaged.

Our duty, as dentists, is to impress upon the authorities the fact that bad teeth are a direct cause of broken health and therefore of inefficiency, and that if we are to build up a strong and virile race in this country we must see to it that the boys and girls of to-day have their mouths and teeth kept in a healthy condition.

### School Dental Service in Toronto

ROBERT E. MILLS, M.A.

Director, Bureau of Records and Statistics, Department of Public

S CHOOL Dentistry in Toronto, being a phase of the school health service, is supplied by the Department of D. 11 general, school health service has three main objects, namely, the discovery and correction of physical defects, the development of knowledge and habits of personal hygiene, and the prevention of communicable diseases. With reference to oral conditions these are the purposes of school dental service. Dental defects are merely physical defects of a particular class, and oral hygiene is merely a branch of personal hygiene. Therefore the same system is employed in recording and notifying dental conditions as is used for any other kind of defect, and the same nurses do the follow-up work from the same fyles.

However, as dental defects greatly outnumber those of other kinds, and as dentistry is a highly specialized art, a special staff of dental examiners is employed to discover defects of the teeth. The school physicians report serious dental conditions, that they believe to be definitely affecting the general health or development of the children when they make their complete physical examinations, but these examinations occur only twice in a pupil's school life. The dental inspectors examine each child's mouth much more frequently, and they have in view the preservation of the teeth, as well as the improvement of general health conditions. The Provincial Regulations require that "Once every year, and at such times as the Medical Officer of Health may direct, the School Dental Officers shall make an examination of the teeth of all pupils attending the schools." This examination is made without asking consent from the parent.

However, in order to make the dental examination more thorough, to afford an object lesson in oral hygiene and an opportunity for personal instruction, and above all, to give each child a fair start in keeping his teeth clean, a rapid prophylactic cleansing is given where necessary, at the time the dental examination is made. Of course, in cases where this or any other treatment is given, the parents' written consent must first be obtained.

Until recently the examinations were made in the classroom, without instruments, other than a wooden tongue depressor. It has been found that the present method of examination, with prophylactic treatment, discovers a much greater percentage of defects than the simple examination without instruments, and therefore may be considered proportionately more effective. The percentage of children found with defects of the teeth has risen with the recent change in method, from 51 to 74 per cent, of the number examined.

The registered attendance of the public schools is about 64,000, and that of the separate (parochial) schools about 8,000. This means that about 72,000 dental examinations must be made each school year. To accomplish this task, the Department of Health has set apart, for the public schools, five dentists, and for the separate schools,

part of the time of two.

A female dental assistant accompanies each of these "survey" dentists, whose function is to enable the dentists to concentrate upon strictly dental work. The dental assistant sees that there is always a child in the chair, that there are always sterilized instruments and the proper supplies at the dentist's hand, that his records are kept, and the parents' notification cards are given to the children to take home. The dentist simply makes the examination and prophylaxis, checks off the defects on the notification and initials same. As an assistant costs less than one-third as much as a dentist, the economy is obvious.

About 53,000 pupils are found annually with dental defects. The defects are noted in detail upon a diagram on the card that is sent to the parent, the nature of the defect being shown against the particular tooth affected. As this card is taken by the parent to the family dentist, the examiner has a strong incentive to careful and accurate work. A carbon duplicate of this chart, which is the record of the defects discovered, is handed to the school nurse, who fyles it along with similar carbons of notifications of other kinds of defects, and uses it as a basis for follow-up visiting to obtain action in the case.

Every effort is used to have the parent take the child to a private dentist for treatment but, as some parents are financially unable to avail themselves of private professional service, the Department conducts dental clinics, where treatment is provided for such cases free of cost. These clinics are located in 20 different school centres, with the idea of placing them within walking distance of the schools served.

The work of the dentists in these operative clinics is restricted, as nearly as possible, to actual dentistry. All of the work connected with making appointments and getting the children to the clinics is the responsibility of the nurses, the clinics simply operating upon those children that appear for treatment. In order to increase the work output of the dentists, it is planned to employ assistants wherever possible in these clinics. Because the dentist is comparatively highly priced labor, it is economical for him to do only such work as requires his specialized skill or professional standing, but he should do as much of it as can be squeezed into his three hours a day. Every effort is made to standardize the equipment, supplies, and operations, whether clerical or professional, to obtain the highest possible efficiency.

To minimize the possibility of accident, no anesthetics are supplied to the ordinary school clinics. Such cases as require local or general anesthesia are referred to specially equipped extraction clinics, of which there are two; one for public and the other for separate schools. Of course, these clinics do routine operative work when not actually

engaged upon anesthesia cases.

To protect the dentist, an application card must be signed by the parent, and endorsed by the nurse before the dentist commences treatment. He records, upon the back of this application card, the actual work done, and initials each day's entry. In this way the warrant for the work and record of what was done is kept together in the dental clinic in the hands of the dentist, the person for whose protection it is designed.

The number of dentists employed upon operative work in the public schools is eleven, and in the separate schools two. The total school dental staff at present is as follows: public schools, sixteen dentists and four assistants; separate schools, two dentists and two assistants. There is also a Chief of School Dental Service, who is in charge of both groups. In both public and separate schools there is

one dentist to about 4,000 pupils.

The dentists and assistants are employed for part time service, working every school day from 9 a.m. to 12.00, and on Friday afternoon from 1.30 to 3.30, the Friday afternoon clinic being for children of pre-school age. The public school extraction clinic operates from 1.00 to 4.00 p.m. each day, as well as in the morning, a different dentist conducting the afternoon clinic.

The dentists are paid from \$80 to \$95 a month, and the assistants about \$6 a week.



